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**FEC** 

## REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

15 111 22 DM 5: 20

(Revised 02/2003)

FORM 3 For An Authorized Committee					Office Use Only			
NAME OF COMMITTEE (in full	TYPE OR PRIN		ample: If typing		12FE4M5			
FRIENDS OF SH	IAK HILL					11111		
		<u> </u>	<u> </u>					
ADDRESS (number and st	PO BOX 486			<u> </u>		<u> </u>		
▼ Check if differen								
Check if different than previously CENTREVIL reported. (ACC)		LE VA 20122						
2. FEC IDENTIFICAT	TON NUMBER ▼	CITY		_ S	TATE A	ZIP CODE	<b>▲</b>	
C C00546705	2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C	3. IS THIS REPORT	X NEW	OR	AMEND (A)		DISTRICT	
Processing		(b) 12-Day <b>PRI</b>	E-Election Repor Primary (12P) Convention (1		General (1	ACCOUNTS	off (12R)	
July 15 Quarterly Report (Q2)  October 15 Quarterly Report (Q3)		Election or	M M /	D D /		in the State of		
January 3	I Year-End Report (YE)	(c) 30-Day <b>PO</b>	ST-Election Rep	ort for the:			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
			General (30G)		Runoff (30	DR) Spe	ecial (30S)	
Terminatio	n Report (TER)	Election or	n e	0 0 /		in the State of		
5. Covering Period	M M / 0 D D 0 0 D 0 0 D 0 D 0 D 0 D 0 D 0 D	/ Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through	M M 06	, D D	2015		
I certify that I have exa	mined this Report and	to the best of my l	knowledge and l	oelief it is tru	e, correct and	d complete.		
Type or Print Name of	Treasurer Robin Hill							
Signature of Treasurer	Robin Hill	Rober /	'iil	Di	ate Contract	7 7 5 2	015	
NOTE: Submission of fa	se, erroneous, or incomp	olete information ma	y subject the per	son signing tl	nis Report to t	he penalties of 2 U.	S.C. §437g.	
Office Use						FEC FORM		